STATE OF INDIANA)	BEFORE THE INDIANA
COUNTY OF MARION) SS:	COMMISSIONER OF INSURANCE
	CAUSE NUMBER: 16045-AG17-0310-063
IN THE MATTER OF:)
Kelly Malott 6253 Saddletree Drive Zionsville, IN 46077	
License Number: 628970) MAY 12 2017
Respondent	STATE OF INDIANA DEPT. OF INSURANCE
Type of Agency Action: Enforcement))

FINAL ORDER

The Indiana Department of Insurance ("Department"), by its counsel, Claire Szpara, and Kelly Malott ("Respondent"), a resident insurance producer licensed to do business in Indiana, signed an Agreed Entry which purports to resolve all issues involved in the action by the Department regarding Respondent's license, and which has been submitted to the Commissioner of Insurance (the "Commissioner") for approval.

The Commissioner, after reviewing the Agreed Entry, finds it has been entered into fairly and without fraud, duress or undue influence, and is fair and equitable between the parties. The Commissioner hereby incorporates the Agreed Entry as if fully set forth herein, and approves and adopts in full the Agreed Entry as a resolution of this matter.

IT IS THEREFORE ORDERED by the Commissioner of Insurance:

1. Respondent's resident Indiana insurance producer license number 628970 shall be in probationary status for a period of one (1) year. Respondent will notify the Department within ten (10) days of any carrier termination during the probationary status period.

2. Respondent shall pay an administrative penalty in the amount of five hundred dollars (\$500), due within thirty (30) after the signing of this Final Order.

ALL OF WHICH IS ORDERED this 12 day of MA, 20 17

Stephen W. Robertson, Commissioner Indiana Department of Insurance

Distribution:

Claire Szpara
INDIANA DEPARTMENT OF INSURANCE
311 West Washington Street, Suite 300
Indianapolis, Indiana 46204-2787

Atty William Ivers For Respondent Kelly Malott 300 N. Meridian St. Suite 990 Indianapolis, IN 46204

Kelly Malott 6253 Saddletree Drive Zionsville, IN 46077

STATE OF INDIANA)	BEFORE THE INDIANA	
) SS: COUNTY OF MARION)	COMMISSIONER OF INSURANCE	
	CAUSE NUMBER: 16045-AG17-0310-063	
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License Number: 628970	STATE OF INDIANA DEPT. OF INSURANCE	
Respondent		
Type of Agency Action: Enforcement)	

<u>AGREÉD ENTRY</u>

This Agreed Entry is executed by and between the Enforcement Division of the Indiana Department of Insurance ("Department"), by counsel, Claire Szpara, and Kelly Malott ("Respondent"), a resident insurance producer licensed to do business in Indiana, to resolve all issues in the above captioned matter. This Agreed Entry is subject to the review and approval of Stephen W. Robertson, Commissioner for the Indiana Department of Insurance ("Commissioner").

WHEREAS, Respondent is a licensed resident insurance producer, holding license number 628970;

WHEREAS, the Department received notice from Selective Insurance Company ("Selective") that Respondent's appointment with Selective was terminated due to retroactively adding an automobile to coverage, upon instructions from his supervisor, to a Selective policy after the vehicle had been in a multi-vehicle accident (the "Business Conduct");

WHEREAS, Selective, has since agreed to re-activate Respondent's computer access;

WHEREAS, Indiana Code § 27-1-15.6-12(b)(8) states the Commissioner may levy a civil penalty, reprimand, place an insurance producer on probation, suspend a license, revoke a license or take any combination of these actions, against a producer for using fraudulent, coercive, or dishonest practices, or demonstrating incompetence, untrustworthiness, or financial irresponsibility in the conduct of business in Indiana or elsewhere;

WHEREAS, Respondent's conduct is in violation of Indiana Code § 27-1-15.6-12(b)(8);

WHEREAS, the Department and Respondent (collectively, the "Parties") desire to resolve their differences and settle the issues without the necessity of an administrative hearing.

IT IS THEREFORE NOW AGREED by and between the Parties as follows:

- 1. The Commissioner has jurisdiction over the subject matter and the Parties in this Agreed Entry.
- 2. This Agreed Entry is executed voluntarily by the Parties.
- 3. Respondent voluntarily and freely waives his right to a public hearing on this matter.
- 4. Respondent voluntarily and freely waives his right to judicial review of this matter.
- 5. Respondent agrees to his license being in a probationary status for one (1) year.
- 6. During the probationary period, Respondent shall inform the Department within ten (10) days if any of his appointments are terminated by any insurance company.
- 7. Respondent agrees to a pay an administrative penalty in the amount of five hundred dollars (\$500) to the Department. Respondent will deposit said funds with his counsel within ten (10) days of Respondent's execution of this Agreed Entry and counsel will

remit payment on behalf of Respondent within thirty (30) days of the Commissioner's

Final Order adopting this Agreed Entry

7. The Department agrees to accept Respondent's compliance with the terms of this

Agreed Entry herein as full satisfaction of this matter.

8. Respondent has carefully read and examined this Agreed Entry and fully understands

its terms.

Respondent has entered into this Agreed Entry freely, and has not been subject to

duress, threat or undue influence.

The Department and the Respondent agree that, by signing this Agreed Entry,

Respondent has not admitted any violation of law or his duties or obligations as a

licensed insurance producer.

11. Should this Agreed Entry not be accepted by the Commissioner, it is agreed that

presentation to and consideration of this Agreed Entry by the Commissioner shall not

unfairly or illegally prejudice the Commissioner from further participation in or

resolution of these proceedings.

12. Respondent is aware that failure to comply with any term of this agreement will result

in the matter being set for hearing.

Claire Szpara, Attorney (#34219-64)

Indiana Department of Insurance

 $\frac{5-8-17}{\text{Date Signed}}$

Kelly Malott, Respondent

STATE OF INDIANA	
) SS:
COUNTY OF Some)

Before me a Notary Public for _____ County, State of Indiana, personally appeared Kelly Malott being first duly sworn by me upon his oath, says that the facts alleged in the foregoing instrument are true.

Signed and sealed this $3^{\frac{1}{2}}$ day of $\frac{1}{2}$ day of $\frac{1}{2}$

Signature

Printed

My Commission expires: 9-13-2023

County of Residence:

CARLA AYRES
Boone County
My Commission Expires
September 15, 2023

Return executed originals to:

INDIANA DEPARTMENT OF INSURANCE Enforcement Division, Suite 103 311 West Washington Street Indianapolis, IN 46204-2787 317/233-4243 - telephone 317/232-5251 – facsimile